



EMPLOYMENT APPLICATION

Rainier Veterinary Hospital is an Equal Opportunity Educational Institution and EEO/Affirmative Action Employer committed to excellence through diversity. Employment offers are made on the basis of qualifications, and without regard to race, sex, religion, national or ethnic origin, disability, age, veteran status, or sexual orientation.

PLEASE FILL OUT, DOWNLOAD, AND UPLOAD TO JOB APPLICATION FORM. Please complete the entire application. Although you may attach a resume at the end, you must still complete all questions. If not, your application will be deemed incomplete and may not be considered. Please fill out each box; don't just indicate "See Resume."

Last Name:	First Name:	Middle Name:	Other names under which you have attended school or been employed:
Street Address:		City, State & Zip:	
Email Address:	Home Phone:	Cell Phone:	Alt Phone:
If hired, can you submit verification of your legal right to work in the USA?	<input type="checkbox"/> Yes <input type="checkbox"/> No		
Are you 18 years of age or older?	<input type="checkbox"/> Yes <input type="checkbox"/> No		If NO, what is your current age?
Have you ever been employed by RVH or RBVH?	<input type="checkbox"/> Yes <input type="checkbox"/> No		If YES, dates of employment & reason for leaving:
If required for position, do you have a valid driver's license?	<input type="checkbox"/> Yes <input type="checkbox"/> No		If YES, State of issuance, license #, and expiration date:
How did you learn about this employment opportunity at RVH or RBVH?			

DESIRED POSITION

Position applied for:	Desired pay/hour or salary:
Employment desired: <input type="checkbox"/> Full Time <input type="checkbox"/> Part Time	Days/Hours available to work:
Available start date:	

EDUCATION

Name of School	City/State	Did you graduate?	If No, # of years left to graduate	If Yes, date of Graduation	Degree received	Major
High School or GED:		<input type="checkbox"/> Yes <input type="checkbox"/> No				
Other School:		<input type="checkbox"/> Yes <input type="checkbox"/> No				
College:		<input type="checkbox"/> Yes <input type="checkbox"/> No				
College:		<input type="checkbox"/> Yes <input type="checkbox"/> No				
Please list any other credentials, licenses, professional affiliations, etc. that are relevant to the job(s) for which you are applying.						

SKILLS: Please list any technical skills, clerical skills, trade skills, etc. that are relevant to the position for which you are applying. Include relevant computer systems and software packages of which you have working knowledge, and not your level of proficiency (basic, intermediate, or expert).

WORK EXPERIENCE: Please detail your previous work history. Begin with your current or most recent employer. If you held multiple positions within the same organization, detail each position separately. Omission of prior employment may be considered falsification of information. Please explain any gaps in employment. Include full-time military or volunteer commitments. **PLEASE DO NOT** complete this information with the notation "See Resume." **PLEASE NOTE:** RVH reserves the right to contact all current and former employers for reference information.

Dates Employed (most recent position) From: To	<input type="checkbox"/> Full time <input type="checkbox"/> Part-time If part-time, # hrs./wk:	Position:
Starting Salary:	Organization Name and Address:	
Final Salary:		
Supervisor's Name & Title:	Supervisor's Phone Number/Email:	Permission to contact? <input type="checkbox"/> Yes <input type="checkbox"/> No
Primary duties:		Reason for Leaving:

Dates Employed (most recent position) From: To	<input type="checkbox"/> Full time <input type="checkbox"/> Part-time If part-time, # hrs./wk:	Position:
Starting Salary:	Organization Name and Address:	
Final Salary:		
Supervisor's Name & Title:	Supervisor's Phone Number/Email:	Permission to contact? <input type="checkbox"/> Yes <input type="checkbox"/> No
Primary duties:		Reason for Leaving:

Dates Employed (most recent position) From: To	<input type="checkbox"/> Full time <input type="checkbox"/> Part-time If part-time, # hrs./wk:	Position:
Starting Salary:	Organization Name and Address:	
Final Salary:		
Supervisor's Name & Title:	Supervisor's Phone Number/Email:	Permission to contact? <input type="checkbox"/> Yes <input type="checkbox"/> No
Primary duties:		Reason for Leaving:

REFERENCES: Please list three work-related references other than a previous employer, friend, or relative.

1. Name:	Relationship to you:	Phone number:	Email Address:
2. Name:	Relationship to you:	Phone number:	Email Address:
3. Name:	Relationship to you:	Phone number:	Email Address:

PLEASE NOTE: Rainier Veterinary Hospital is committed to protecting the safety, health, and well-being of all employees and other individuals in our workplace. We recognize that alcohol abuse and drug use pose a significant threat to our goals. We have established a drug-free workplace programs that balances our respect for individuals with the need to maintain an alcohol and drug-free environment.

PLEASE READ CAREFULLY AND SIGN THAT YOU UNDERSTAND AND ACCEPT THIS INFORMATION

In exchange for the consideration of my job application by Rainier Veterinary Hospital (hereinafter called “the Company”), I agree that:

I certify that all statements on this application are true and complete to the best of my knowledge. I understand false or incomplete statements shall be sufficient cause for disqualification or dismissal. I authorize investigation of all statements contained in this application. I understand that the misrepresentation or omission of facts called for is cause for dismissal at any time without any previous notice. I hereby give the Company permission to contact schools, previous employers (unless otherwise indicated), references, and others, and hereby release the Company from any liability as a result of such contract.

Neither the acceptance of this application nor the subsequent entry into any type of employment relationship, either in the position applied for or any other position, and regardless of the contents of employee handbooks, personnel manuals, benefit plans, policy statements, and the like as they may exist from time to time, or other Company practices, shall serve to create an actual or implied contract of employment, or to confer any right to remain an employee of the Company or otherwise to change in any respect the employment-at-will relationship between it and the undersigned, and that relationship cannot be altered except by a written instrument signed by the Owner of the Company, Debra Nicholson. Both the undersigned and Rainier Veterinary Hospital may end the employment relationship at any time, without specified notice or reason. If employed, I understand that the Company may unilaterally change or revise their benefits, policies and procedures and such changes may include reduction in benefits.

I understand that this document is **not** an offer of employment, and that an offer of employment, if tendered, does **not** constitute a contract for continued guaranteed employment.

If requested, I agree to submit to background investigation, and/or screening for illegal substances upon conditional offer of employment. I further understand that continued employment may be based on the successful passing of testing under such policy.

Upon written request from me, the Company, will provide me with additional information concerning the nature and scope of any such report requested by it, as required by the Fair Credit Reporting Act.

If employed, I will be required to furnish proof of eligibility to work in the United States, to file a State Security questionnaire, and to comply with company, State, and Federal regulations.

Signature of applicant _____ Date:

Please type your full name.

NEXT STEPS:

1. Save this completed PDF to your computer.
2. Upload your application at rainiervet.com/apply.